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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of)
Peter J. Churchyard et al.)
Application No. 09/650,729)
Filed: August 30, 2000)
For: METHOD AND SYSTEM FOR)
MAINTAINING A COMMUNICATIONS)
PROTOCOL SESSION)

Examiner: Unassigned

Art Unit: 2183

Date: October 11, 2002

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Technology Center 2100

CERTIFICATE OF MAILING

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Erica L. Farlow

REQUEST FOR CORRECTED FILING RECEIPT

Commissioner for Patents

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Washington, D.C. 20231

Sir:

Enclosed is a copy of the Filing Receipt for the above-identified patent application. Please reprint the Filing Receipt as follows and mail the corrected copy to the undersigned.

Change the Attorney Docket Number from "NTWK010/00US (00.0058.01)" to -- NAI1P086/00.058.01--.

Change the correspondence address from "22903, COOLEY GODWARD LLP, ATTN: PATENT GROUP, 11951 FREEDOM DRIVE, SUITE 1700, ONE FREEDOM SQUARE-RESTON TOWN CENTER, RESTON, VA 20190-5061" to --28875, Silicon Valley IP Group, LLC, P.O. Box 721120, San Jose, Ca. 95172-1120--.

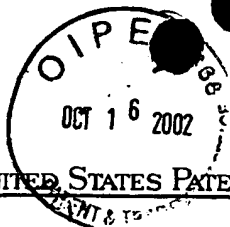
The Commissioner is authorized to charge any fees that may be due to Deposit Account 50-1351 (Order No. NAI1P086/00.058.01).

Respectfully submitted,
Silicon Valley IP Group, LLC

Kevin J. Zilka
Reg. No. 41,429

P.O. Box 721120
San Jose, CA 95172-1120
(408) 971-2573

Attorney Docket No. NAI1P086/00.058.01



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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO.	DRAWINGS	TOT CLAIMS	IND CLAIMS
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09/650,729	08/30/2000	2183	920	NTWK010/0005 (00-0058-01) NA112086/00.058-01	5	16	4
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22903 28875
GOOLEY GODWARD LLP Silicon Valley IP Group, LLC.
ATTN: PATENT GROUP P.O. Box 721120
14951 FREEDOM DRIVE, SUITE 1700
ONE FREEDOM SQUARE RESTON TOWN CENTER
RESTON, VA 20190-5001 San Jose, CA 95172-1120

FILING RECEIPT



OC000000005729504

Date Mailed: 02/02/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Peter J. Churchyard, Mt. Airy, MD ;
William P. Supemor, Falls Church, VA ;

Continuing Data as Claimed by Applicant

Foreign Applications

If Required, Foreign Filing License Granted 10/24/2000

Title

Method and system for maintaining a communications protocol session

Preliminary Class

712

Data entry by : BROWN, ROSCOE

Team : OIPE

Date: 02/02/2001

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Bib Data Sheet

CONFIRMATION NO. 2546

SERIAL NUMBER 09/650,729	FILING DATE 08/30/2000 RULE	CLASS 709	GROUP ART UNIT 2153	ATTORNEY DOCKET NO. NAI1P086/00.058.01	
APPLICANTS Peter J. Churchyard, Mt. Airy, MD; William P. Supernor, Falls Church, VA; <i>RF +</i>					
** CONTINUING DATA ***** <i>RF +</i>					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 10/24/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>RF +</i> Allowance Examiner's Signature <i>RF +</i> Initials		STATE OR COUNTRY MD	SHEETS DRAWING 5	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 4
ADDRESS 28875					
TITLE Method and system for maintaining a communications protocol session					
FILING FEE RECEIVED 920	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		